Filing Company: Safeco Insurance Company of Illinois State Tracking Number: #1397204 \$50

Company Tracking Number: 07-AR-112007-F

TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)

Product Name: Personal Auto

Project Name/Number: New Vehicle Replacement/07-AR-112007-F

Filing at a Glance

Company: Safeco Insurance Company of Illinois

Product Name: Personal Auto SERFF Tr Num: SAFA-125373487 State: Arkansas

TOI: 19.0 Personal Auto SERFF Status: Closed State Tr Num: #1397204 \$50 Sub-TOI: 19.0001 Private Passenger Auto Co Tr Num: 07-AR-112007-F State Status: Fees verified and

(PPA) received

Filing Type: Form Co Status: Reviewer(s): Alexa Grissom, Betty

Montesi, Brittany Yielding
uthors: Betty Osher, Wanda
Disposition Date: 01/14/2008

Authors: Betty Osher, Wanda

Varnell

Date Submitted: 01/02/2008 Disposition Status: Approved

04/10/2008

State Filing Description:

General Information

Project Name: New Vehicle Replacement

Project Number: 07-AR-112007-F

Status of Filing in Domicile:

Domicile Status Comments:

Reference Organization: Reference Number:
Reference Title: Advisory Org. Circular:

Filing Status Changed: 01/14/2008

State Status Changed: 01/14/2008 Deemer Date:

Corresponding Filing Tracking Number:

Filing Description:

The SA-2692/EP was revised to remove the exclusion for loss caused by fire, theft, larceny, conversion, malicious mischief or vandalism. No other changes were made to the form. A side-by-side comparison of the changes are included in the cover letter.

SAFA-125373487 SERFF Tracking Number: State: Arkansas

#1397204 \$50 Filing Company: Safeco Insurance Company of Illinois State Tracking Number:

07-AR-112007-F Company Tracking Number:

19.0 Personal Auto TOI: Sub-TOI: 19.0001 Private Passenger Auto (PPA)

Product Name: Personal Auto

Project Name/Number: New Vehicle Replacement/07-AR-112007-F

Company and Contact

Filing Contact Information

Betty Osher, State Filings Analyst betosh@safeco.com Safeco Plaza (206) 473-5309 [Phone]

Seattle, WA 98185 (206) 473-6722[FAX]

Filing Company Information

Safeco Insurance Company of Illinois CoCode: 39012 State of Domicile: Illinois Company Type: P&C

2800 West Higgins Road Group Code: 163

Suite 1100

Hoffman Estates, IL 60195-5205 Group Name: State ID Number:

(800) 544-2614 ext. [Phone] FEIN Number: 91-1115311

Filing Fees

Fee Required? Yes Fee Amount: \$50.00 Retaliatory? No

Fee Explanation: \$50.00 per filing.

Per Company: No

CHECK NUMBER CHECK AMOUNT CHECK DATE 1397204 \$50.00 12/27/2007

Filing Company: Safeco Insurance Company of Illinois State Tracking Number: #1397204 \$50

Company Tracking Number: 07-AR-112007-F

TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)

Product Name: Personal Auto

Project Name/Number: New Vehicle Replacement/07-AR-112007-F

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Alexa Grissom	01/14/2008	01/14/2008

Filing Company: Safeco Insurance Company of Illinois State Tracking Number: #1397204 \$50

Company Tracking Number: 07-AR-112007-F

TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)

Product Name: Personal Auto

Project Name/Number: New Vehicle Replacement/07-AR-112007-F

Disposition

Disposition Date: 01/14/2008

Effective Date (New): 03/06/2008

Effective Date (Renewal): 04/10/2008

Status: Approved

Comment:

Rate data does NOT apply to filing.

Filing Company: Safeco Insurance Company of Illinois State Tracking Number: #1397204 \$50

Company Tracking Number: 07-AR-112007-F

TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)

Product Name: Personal Auto

Project Name/Number: New Vehicle Replacement/07-AR-112007-F

Item Type Item Name Item Status Public Access

Supporting Document Uniform Transmittal Document-Property & Approved Yes

Casualty

Supporting Document Cover Letter Approved Yes

Form New Vehicle Replacement Approved Yes

Filing Company: Safeco Insurance Company of Illinois State Tracking Number: #1397204 \$50

Company Tracking Number: 07-AR-112007-F

TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)

Product Name: Personal Auto

Project Name/Number: New Vehicle Replacement/07-AR-112007-F

Form Schedule

Review	Form Name	Form #	Edition	Form Type Action	Action Specific Readability	Attachment
Status			Date		Data	
Approved	New Vehicle	SA-	1/08	Policy/CoveReplaced	Replaced Form #:42.30	SA_2692EP
	Replacement	2692/EP		rage Form	SA-2692/EP 5/06	_012008_f.p
					Previous Filing #:	df

NEW VEHICLE REPLACEMENT

For an additional premium, it is agreed that the policy is amended as follows:

PART D — COVERAGE FOR DAMAGE TO YOUR AUTO

Limit of Liability

The following provision is added:

In the event of a total loss to your **new vehicle** to which this coverage applies, as shown in the Declarations, we will pay at your option:

- The verifiable new vehicle purchase price of your damaged vehicle, not including any insurance or warranties purchased;
- The purchase price, as negotiated by us, of a new vehicle of the same or similar make, model and equipment, not including any furnishings, parts or equipment not installed by the manufacturer or manufacturer's dealership;

 The market value of your damaged vehicle, not including any furnishings, parts or equipment not installed by the manufacturer or manufacturer's dealership.

This coverage is provided without deduction for depreciation.

Conditions

"New vehicle" means any vehicle that you are the original owner and the vehicle has not been previously titled.

Coverage under this endorsement shall be applicable for no more than 365 days from the date of purchase of the vehicle to which it applies, plus the remainder of the policy term in which the 365th day from purchase ends.

All other provisions of this policy apply.

SA-2692/EP 1/08

Filing Company: Safeco Insurance Company of Illinois State Tracking Number: #1397204 \$50

Company Tracking Number: 07-AR-112007-F

TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)

Product Name: Personal Auto

Project Name/Number: New Vehicle Replacement/07-AR-112007-F

Rate Information

Rate data does NOT apply to filing.

Filing Company: Safeco Insurance Company of Illinois State Tracking Number: #1397204 \$50

Company Tracking Number: 07-AR-112007-F

TOI: 19.0 Personal Auto Sub-TOI: 19.0001 Private Passenger Auto (PPA)

Product Name: Personal Auto

Project Name/Number: New Vehicle Replacement/07-AR-112007-F

Supporting Document Schedules

Review Status:

Satisfied -Name: Uniform Transmittal Document- Approved 01/14/2008

Property & Casualty

Comments:

Attachments: PCTD-1 2007.pdf FFS-1 2007.pdf

Review Status:

Satisfied -Name: Cover Letter Approved 01/14/2008

Comments: Attachment:

AR Cover Letter.pdf

Property & Casualty Transmittal Document

1.	Reserved for Insurance	nsurance Department Use only								
	Dept. Use Only	Date the filing is received:								
		lyst:								
		Dispos	sposition:							
		d. I	Date o	of disposition of the filing:						
		e. E	Effect	ive date of fili	ive date of filing:					
			Nev	w Business						
			Ren	newal Business	S					
		f. S	State I	Filing #:						
				F Filing #:						
		h. S	Subjec	ct Codes						
3.	Group Name						Group	NAIC#		
	Safeco Insurance Companies								163	
4.	Company Name(s)			Domicile	NA	AIC# FEI		#	Sta	te#
	Safeco Insurance Company of I	Ilinois		Illinois	39	012	91-111	5311		
ŀ										
	5 Company Tracking Number 07-AP-112007-F									
5.	Company Tracking Number		07-A	R-112007-F						
		nte Officer			e num	nberl				
	Company Tracking Number tact Info of Filer(s) or Corpora Name and address	nte Officer Title	(s) [AR-112007-F include toll-free Telephone		nber]	#		e-ma	nil
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Con	tact Info of Filer(s) or Corpora Name and address Betty Osher 4333 Brooklyn Ave. NE	Title Senior Forms	(s) [include toll-free Telephone	#s 9	FAX 206.473.6		beto		
Con 6.	Name and address Betty Osher 4333 Brooklyn Ave. NE Seattle, WA. 98105	Title Senior Forms Analyst	(s) [Telephone 206.473.530	#s 9	FAX 206.473.6		beto		
7. 8.	tact Info of Filer(s) or Corpora Name and address Betty Osher 4333 Brooklyn Ave. NE Seattle, WA. 98105 Signature of authorized filer	Title Senior Forms Analyst	r(s) [Telephone 206.473.530 Betty Osher	# s 9	FAX 206.473.6		beto		
7. 8. Fility	Name and address Betty Osher 4333 Brooklyn Ave. NE Seattle, WA. 98105 Signature of authorized filer Please print name of authorized ing information (see General 1) Type of Insurance (TOI)	Title Senior Forms Analyst zed filer Instruction	ns for 19.0	Telephone 206.473.530 Betty Osher descriptions of Personal Auto	#s 9 of the	206.473.6 ese fields)	5722	beto		
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PC TD-1 pg 1 of 2 $\,$

Property & Casualty Transmittal Document---

15.	Reference Filing?	Yes No			
16.	Reference Organization (if applicable)	N/A			
17.	Reference Organization # & Title	N/A			
18.	Company's Date of Filing	January 2, 2008			
19.	Status of filing in domicile	☐ Not Filed ☐ Pending ☐ Authorized ☐ Disapproved			
20.	This filing transmittal is part of Company	Tracking # 07-AR-112007-F			
20.	This ming transmittal is part of Company	11acking # 07-AK-112007-1			
21.	Filing Description [This area can be used in li	eu of a cover letter or filing memorandum and is free-form text]			
	SA-2692/EP was revised to remove the exclusion hief or vandalism. No other changes were made	on for loss caused by fire, theft, larceny, conversion, malicious le to the form.			
	E. E. (E.)	('6 1' 11)			
22. Filing Fees (Filer must provide check # and fee amount if applicable) [If a state requires you to show how you calculated your filing fees, place that calculation below]					
	neck #: 1397204 nount: \$50.00	nation jobs filling roos, place that ententation below]			

***Refer to each state's checklist for additional state specific requirements (i.e. # of additional copies required, other state specific forms, etc.)

Refer to each state's checklist for additional state specific requirements or instructions on calculating

fees.

FORM FILING SCHEDULE

(This form must be provided ONLY when making a filing that includes forms) (Do not refer to the body of the filing for the forms listing, unless allowed by state.)

1.	This filing transmittal Tracking #	is part of Company	07-AR-11	.2007-F			
2.	This filing corresponds to rate/rule filing number (Company tracking number of rate/rule filing, if applicable) N/A						
3.	Form Name /Description/Synopsis	Form # Include edition date	Replace Or withdra	wn?	If replacement, give form # it replaces	Previous state filing number, if required by state	
01	New Vehicle Replacement	SA-2692/EP 1/08	☐ New ☐ Replacement ☐ Withdrawn		SA-2692/EP 5/06		
02			New Replacement Withdrawn				
03			With	acement drawn			
04			New Replacement Withdrawn				
05			With	acement drawn			
06			With	acement drawn			
07				acement drawn			
08				acement drawn			
09			With	acement drawn			
10				acement drawn			



SAFECO PROPERTY & CASUALTY INSURANCE COMPANIES

Safeco Plaza Seattle, WA 98185-0001

January 2, 2008

Phone: (206) 545-5000 www.safeco.com

Honorable Mike Pickens Commissioner of Insurance Arkansas Insurance Department 1200 West Third Street Little Rock, Arkansas 72201

Safeco Insurance Company of Illinois 163-39012 Independent Automobile Form Filing New Vehicle Replacement, SA-2692/EP 1/08

Personal Auto Program

Proposed Effective Date: March 6, 2008 – New Business

April 10, 2008 – Renewal Business

Filing Number: 07-AR-112007-F

The above captioned endorsement is filed on behalf of the company listed. The SA-2692/EP 1/08 will replace the SA-2692/EP 5/06 currently on file.

The SA-2692/EP was revised to remove the exclusion for loss caused by fire, theft, larceny, conversion, malicious mischief or vandalism. No other changes were made to the form. A side-by-side comparison of the change is shown below.

NEW VEHICLE REPLACEMENT

For an additional premium, it is agreed that the policy is amended as follows:

PARTD—COVERAGE FOR DAMAGE TO YOUR AUTO Limit of Liability

The following provision is added:

In the event of a total loss to your **new vehicle** to which this coverage applies, as shown in the Declarations, we will pay at your option:

- 1. The verifiable **new vehicle** purchase price of your damaged vehicle, not including any insurance or warranties purchased;
- 2. The purchase price, as negotiated by us, of a **new vehicle** of the same or similar make, model and equipment, not including any furnishings, parts or equipment not installed by the manufacturer or manufacturer's dealership;
- **3.** The market value of your damaged vehicle, not including any furnishings, parts or equipment not installed by the manufacturer or manufacturer's dealership.

This coverage is provided without deduction for depreciation.

Exclusions and Conditions

"New vehicle" means any vehicle that you are the original owner and the vehicle has not been previously titled.

Coverage under this endorsement does not apply to loss caused by fire, theft, larceny, conversion, malicious mischief or vandalism.

Coverage under this endorsement shall be applicable for no more than 365 days from the date of purchase of the vehicle to which it applies, plus the remainder of the policy term in which the 365th day from purchase ends.

All other provisions of this policy apply.

We are requesting an effective date for this submission of March 6, 2008 for New Business and April 10, 2008 for Renewal Business.

Sincerely,

Betty Osher, CPCU Senior Forms Analyst Product Management (206) 47305309

FAX (206) 925-1414 betosh@safeco.com

EJO/wtv